


NOV 15 2004

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant:	David H. Sitrick	)	<b><u>Certificate of Transmission under</u></b> <b><u>37 CFR 1.8</u></b> I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office Office to FAX number (703.872.9306), on <u>November 15, 2004.</u>  David H. Sitrick (2 pages transmitted)
For:	SYSTEM AND METHODOLOGY FOR COMMUNICATION AND DISPLAY	)	
Serial Number:	09/492,218	)	
Filed:	January 26, 2000	)	
Examiner:	M. Fletcher	)	
Art Unit:	2837	)	
Attorney Docket:	STD 1757	)	

**PETITION FOR EXTENSION OF TIME**
 Director of the Patent and Trademark Office  
 Washington D.C. 20231

Applicant(s) hereby petition(s) under 37 CFR §1.136(a) for an extension of time for response in the above-identified application for the period required to make the attached response timely.

**Extension fee for response within first month:**

11/22/2004 TDP:KMS 00000005 503166 09200000	(X) By a small entity (§1.9(f))	\$	55.00
01 FC:2251	( ) By other than a small entity	\$	110.00
			55.00 DA

**Extension fee for response within second month:**

( ) By a small entity (§1.9(f))	\$	195.00
( ) By other than a small entity	\$	390.00

**Extension fee for response within third month:**

( ) By a small entity (§1.9(f))	\$	445.00
( ) By other than a small entity	\$	890.00

**Extension fee for response within fourth month:**


( ) By a small entity (§1.9(f))	\$	695.00
( ) By other than a small entity	\$	1,390.00

(X) Charge \$ 55.00 to Deposit Account No. 50-1166.

PATENT APPLICATION  
Serial Number: 09/492,218  
Attorney Docket Number: STD 1757

(X) The Commissioner is hereby authorized to charge any additional fees which may be required to this application under 37 CFR §§1.16-1.17, or credit any overpayment, to Deposit Account No. 50-1166. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-1166.

Respectfully submitted,



David H. Sitrick  
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November 15, 2004

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**PATENT APPLICATION FEE DETERMINATION RECORD**

Substitute for Form PTO-875

Application or Docket Number

09492218

**CLAIMS AS FILED - PART I**

(Column 1)

(Column 2)

**SMALL ENTITY**

OR

**OTHER THAN  
SMALL ENTITY**

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

RATE	FEE
	\$ _____
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL	

OR

OR

OR

OR

OR

RATE	FEE
	\$ _____
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2.

**CLAIMS AS AMENDED - PART II**

(Column 1)

(Column 2)

(Column 3)

**SMALL ENTITY**

OR

**OTHER THAN  
SMALL ENTITY**

AMENDMENT A	11/15/04	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))	11/20	Minus	**	115	= _____
Independent (37 CFR 1.16(b))	9	Minus	***	9	= _____
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					

RATE	ADDI- TIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))		Minus	**		= _____
Independent (37 CFR 1.16(b))		Minus	***		= _____
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					

RATE	ADDI- TIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.16(c))		Minus	**		= _____
Independent (37 CFR 1.16(b))		Minus	***		= _____
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					

RATE	ADDI- TIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL ADD'L FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.